



MISSOURI DEPARTMENT OF NATURAL RESOURCES
WATER PROTECTION PROGRAM, FINANCIAL ASSISTANCE CENTER
RURAL WATER GRANT APPLICATION
Submit to: P.O. Box 176, Jefferson City, MO 65102-0176
Attn: Financial Assistance Center

FOR OFFICE USE ONLY	
DATE RECEIVED	
GRANT NUMBER	
PWS ID NUMBER	

This application is for a Rural Water Grant

APPLICANT INFORMATION					
1. APPLICANT NAME					
MAILING ADDRESS					
CITY		STATE	ZIP CODE + FOUR	COUNTY	
			-		
TELEPHONE NUMBER WITH AREA CODE () - Ext.			FAX NUMBER WITH AREA CODE () - Ext.		
AUTHORIZED REPRESENTATIVE NAME			AUTHORIZED REPRESENTATIVE TITLE		
2. NAME OF PERSON TO CONTACT ABOUT THIS APPLICATION			TELEPHONE NUMBER WITH AREA CODE () - Ext.		
3. CONSULTING ENGINEER					
CONSULTANT MAILING ADDRESS					
CITY		STATE	ZIP CODE + FOUR		
			-		
CONSULTANT TELEPHONE NUMBER WITH AREA CODE () - Ext.			CONSULTANT FAX NUMBER WITH AREA CODE () -		
POPULATION (CURRENT CENSUS)	4. POPULATION OF AREA TO BE SERVED		FEDERAL TAX ID NUMBER		
5. STATE SENATE DISTRICT NUMBER(S) FOR PROJECT			STATE REPRESENTATIVE DISTRICT NUMBER(S) FOR PROJECT		
6. ANTICIPATED PRIMARY SOURCES OF FUNDING (ATTACH EVIDENCE OF FUNDING COMMITMENTS, IF AVAILABLE)					
ESTIMATED PROJECT COST INFORMATION					
7. Cost Estimate Dated: / /			8. Calculate Rural Water Grant Amount:		
Development and Administrative	\$	A. \$1,400 x Number of contracted connections up to a maximum of 50% of the total project cost or \$500,000 (whichever is less)		\$	
Land, Easements and Right-of-Way	\$	B. Number of Potential Users			
Legal	\$	C. Number of Contracted Users			
Engineering	\$	D. Ratio of Contracted to Potential Users (Must be at least 75%)			
Construction	\$				
Equipment	\$				
Other Costs (labs, upgrades, automation, etc.) Specify:	\$				
Contingencies	\$				
Total Project Costs	\$				
9. ANTICIPATED FUNDING					
Total Costs	Cash Contributions	Rural Water Grants	Other Grants	Loan	Bonds
\$	\$	\$	\$	\$	\$
Percentage of Total Costs	%	%	%	%	%

10. PROJECT DESCRIPTION

(ATTACH TWO COPIES OF THE ENGINEERING REPORT OR INDICATE THE REVIEW NUMBER)

APPLICANT FINANCIAL INFORMATION

Anticipated term of the loan (years)

DATE OF BALLOT APPROVAL
/ /ANTICIPATED DATE FOR BOND ELECTION
/ /

11. DEBT INSTRUMENT (CHECK ONE)

☐

General Obligation Bonds

☐

Revenue Bonds

12. BONDED INDEBTEDNESS OF THE DISTRICT/COMMUNITY

Outstanding Balance of Bonds	Purpose of the Bonds		Interest Rate	Amortization Period	Payment Due Date	Installation Amount
\$			%		/ /	\$
\$			%		/ /	\$
\$			%		/ /	\$
\$			%		/ /	\$
\$			%		/ /	\$
GENERAL OBLIGATION BONDING CAPACITY			UNOBLIGATED BALANCE			
\$			\$			
OTHER SOURCES OF INCOME AVAILABLE TO FINANCE THIS PROJECT				CASH ON HAND		
\$				\$		
MEDIAN HOUSEHOLD INCOME (AS DETERMINED BY LATEST CENSUS)				PROJECTED MONTHLY USER CHARGE (PER 5,000 GALLONS)		
\$				\$		

MO 780-2037 (02-09)

SAFE DRINKING WATER ACT COMPLIANCE (ONLY EXISTING PUBLIC WATER SYSTEMS ARE ELIGIBLE FOR PRIORITY POINTS UNDER THIS SECTION)

Describe anticipated compliance benefits of the proposed project. Check all of the items listed below that apply to this project and describe each item below. Any other supporting documentation must be attached and specifically cross-referenced. Please type or print legibly.

THIS PROJECT WILL (CHECK ALL THAT APPLY)

- ☐ Correct persistent violations of maximum contaminant levels or treatment performance criteria for acute risk contaminants (such as coliform, turbidity, or nitrate) within the past 36 months.
- ☐ Correct persistent violations of treatment technique requirements
- ☐ Correct persistent violations of maximum contaminant levels for non-acute risk primary contaminants occurring within the past 36 months
- ☐ Correct persistent violations of maximum contaminant levels for secondary contaminants occurring within the past 36 months
- ☐ Enable the public water system to comply with certain anticipated federal regulations
- ☐ Enable the public water system to comply with an administrative order, bilateral compliance agreement, permit or other enforceable document issued by the Missouri Department of Natural Resources

DESCRIPTION OR ADDITIONAL COMMENTS (PLEASE TYPE OR PRINT LEGIBLY):

PUBLIC HEALTH

Describe the anticipated public health benefits of the proposed project. Check all items listed below that apply to the project and describe in the space provided. You must attach any other supporting documentation and specifically cross-reference it in the narrative description. Only supporting documentation described on the application form will be considered for the Public Health priority point evaluation. Please type or print legibly.

- ☐ Existing public water systems only: At least 51 percent of the project will address problems causing a waterborne disease outbreak attributable to the PWS by the Department of Health and Senior Services.
- ☐ Existing public water systems only: The public water system can document its inability consistently to maintain ≥ 35 psi as a normal working pressure in the distribution system.
- ☐ Existing public water systems only: The public water system can document its inability consistently to maintain ≥ 20 psi at all service connections.
- ☐ Private or non-community wells or sources in the project service area are unable to consistently provide an adequate amount of potable water for general household purposes and at least 51 percent of the project addresses this need.

THIS PROJECT WILL (CHECK ALL THAT APPLY)

- ☐ Provide a public water system with a backup well or backup interconnection with another public water system.
- ☐ Address problem(s) with improper well construction.
- ☐ Address unaccounted for water that exceeds 10 percent of the drinking water produced by the system, and the loss is due to leaking or broken water lines.
- ☐ Provide necessary modifications to a distribution system anticipated to exceed design capacity or useful life within the next five years.
- ☐ Address a demonstrated need to replace faulty pipes or substandard pipe materials.
- ☐ Address a demonstrated need for distribution system valves and flushing devices.
- ☐ Address a demonstrated need for looping of water mains.
- ☐ Address an inability to maintain a disinfectant residual at all points in the distribution system.
- ☐ Address water storage facilities in poor condition not related to inadequate maintenance.
- ☐ Provide the public water system with a storage capacity equal to one day's average use or provide the public water system with adequate standby power.
- ☐ Provide necessary modifications to a source or treatment facility anticipated to exceed design capacity or useful life within the next five years.
- ☐ Address significant degradation of the quality of raw water supply.
- ☐ Address significant degradation of the quality of finished water in storage.
- ☐ Enable the public water system to meet existing state requirements for the treatment and/or storage of waste residues generated by the water treatment plant.
- ☐ Enable repair or replacement of treatment facilities for required disinfection or turbidity removal which are severely deteriorated beyond the useful life of the facility.
- ☐ Address the vulnerability of the facility's source to natural disasters (such as flood or drought) or contamination.
- ☐ Address the vulnerability of the facility's treatment plant to natural disasters (such as flood or drought) or contamination.
- ☐ The facility is located in a department approved Wellhead Protection Area.
- ☐ Provide at least 51 percent of the project cost is for repairing or replacing an existing public water system damaged or destroyed by a natural disaster. Note: Documentation must be submitted; along with a statement that adequate state or federal disaster relief is not available.
- ☐ Provide necessary upgrades to facilities of a primary water system to continue or expand services as a regional water supplier.
- ☐ Result in the permanent supply interconnection of two or more existing public water systems. (This includes new water systems that allow small water systems within their boundaries to consolidate)
- ☐ Result in a regional management system responsible for the day-to-day operation of the water system.
- ☐ Provide the necessary upgrades or new water distribution system to meet the standards of a regional supplier for the purpose of consolidation.
- ☐ Enable the public water system to enhance the water system security.

OTHER ITEMS

CHECK ALL THAT APPLY

- ☐ Project applied for Drinking Water State Revolving Fund loan
- ☐ Project is on the Drinking Water State Revolving Fund Fundable List

PUBLIC HEALTH (CONTINUED)

NARRATIVE DESCRIPTION OR ADDITIONAL COMMENTS (PLEASE TYPE OR PRINT LEGIBLY)

TECHNICAL, MANAGERIAL AND FINANCIAL CAPACITY

Describe the technical, managerial and financial capability of the system. Check all items listed below that apply to the project and describe in the space provided. Any other supporting documentation must be attached and specifically cross-referenced in the narrative description. Only supporting documentation described on the application form will be considered for the technical, managerial and financial priority point evaluation.

(CHECK ALL THAT APPLY)

- ☐ Water system has a Continuing Operating Authority. (A permanent organization responsible for maintaining the integrity of the water system)
- ☐ Have population less than 3,300.
- ☐ Have a properly certified water operator.
- ☐ Have water meters or project will include the installation of water meters.
- ☐ Water system has a distribution map showing the size and location of all waterlines, valves, hydrants, storage facilities, pumping and treatment facilities, sources and a water main flushing program.
- ☐ Water system has developed an organizational chart showing clear lines of authority over the water system and person designated the liaison with the department for compliance issues.
- ☐ Have had an inspection from the department's Regional Office within the past three years and provided the most current inspection report with this application.
- ☐ Have developed an annual budget showing expected revenues and expenditures of the system.
- ☐ Have a written rate structure and fees for connection, reconnection and late payment.
- ☐ Rates of the water system are adequate to meet expenses for the operation, maintenance, and replacement of the water system. (Please include revenues minus expenses in the narrative description)
- ☐ Rates exceed 2 percent of the Median Household Income.
- ☐ Perform annual audits using Generally Accepted Accounting Principles and Practices.
- ☐ Maintains a reserve for the replacement of major components of the system.
- ☐ Revenues of the system only used for drinking water purposes.
- ☐ Have a delinquency rate for water use billing less than 5 percent.
- ☐ Have any board members attended drinking water utility board training in the past three years? ☐ YES ☐ NO
(please list trainings below)

TECHNICAL, MANAGERIAL AND FINANCIAL CAPACITY

NARRATIVE DESCRIPTION OR ADDITIONAL COMMENTS (PLEASE TYPE OR PRINT LEGIBLY)

TECHNICAL, MANAGERIAL AND FINANCIAL CAPACITY (CONTINUED)

NARRATIVE DESCRIPTION OR ADDITIONAL COMMENTS (PLEASE TYPE OR PRINT LEGIBLY)

CERTIFICATION

The undersigned representative certifies that the information submitted in this application is true and correct to the best of his or her knowledge and that he or she is authorized to sign and submit this application. The applicant agrees, if a grant is awarded on the basis of this application, to comply with all applicable rules and regulations of the Department of Natural Resources and the terms and conditions of the grant agreement. **Incomplete applications will be returned.**

SIGNATURE OF AUTHORIZED REPRESENTATIVE

DATE
/ /

NAME AND OFFICIAL TITLE (TYPE OR PRINT)

TELEPHONE NUMBER WITH AREA CODE
() - Ext.**PREPARER'S NAME AND SIGNATURE (IF APPLICABLE)**

SIGNATURE OF PREPARER

DATE
/ /

NAME AND TITLE (PRINT OR TYPE)

TELEPHONE NUMBER WITH AREA CODE
() - Ext.